

Agency Case Number C000880358-01		Agency NCIC Number GAGSP0000		<b>GEORGIA MOTOR VEHICLE CRASH REPORT</b>				County DOUGLAS		Date Rec. by GDOT			
Estimated Crash Date: 02/14/23 Time: 16:00		Dispatch Date: 02/14/23 Time: 16:23		Arrival Date: 02/14/23 Time: 16:53		Total Number of Vehicles: 2 Injuries: 0 Fatalities: 0		Inside City Of					
Road of Occurrence I20WB EXIT RAMP						At Its Intersection With _____				Corrected Report			
Not At Its Intersection But 0.1 Miles Feet North South East West						Of SR 6				Sup To Original			
Latitude (Y) 33.77699395079 (Format) 00.00000						Longitude (X) -84.6033503325974 (Format) -00.00000						Hit And Run?	

  

Unit # 1 Driver Ped Bike LAST NAME PARKER FIRST ALVIN MIDDLE B				Unit # 2 Driver Ped Bike LAST NAME SMITH FIRST JODY MIDDLE RYAN			
Address 1871 BEXAR AVE EAST				Address 3234 W ANDERSON DR			
City ALPHARETTA State GA Zip 30005 DOB /1975				City LITHIA SPRINGS State GA Zip 30122 DOB /1978			
Driver's License No. 6614715 Class C State AL Country UNITED STATES				Driver's License No. 060231179 Class C State GA Country UNITED STATES			
Insurance Co. CANAL INS Policy No. I-641351001-5 Telephone No.				Insurance Co. FEDERATED MUTUAL INS Policy No. 6121845 Telephone No.			
Year 2015 Make FRHT Model M2 106				Year 2018 Make FORD Model TRANSIT			
VIN 3ALACWDT6FDGR9127 Vehicle Color WHI				VIN 1FDYR5PM4JKA44101 Vehicle Color WHI			
Tag # 49A0T8R State AL County Year 2023				Tag # TCF2315 State GA County DOUGLAS Year 2023			
Trailer Tag # State County Year				Trailer Tag # State County Year			
Same as Driver Owner's Last Name First Middle PREMIER LLC				Same as Driver Owner's Last Name First Middle PANTHER BRANDS LLC			
Address 1871 BEXAR AVE EAST				Address 3234 W ANDERSON DR			
City ALPHARETTA State GA Zip 30005				City LITHIA SPRINGS State GA Zip 30122-2505			
Removed By: DRIVER Request List				Removed By: DRIVER Request List			
Alco Test: 2 Type: Results: Drug Test: 2 Type: Results:				Alco Test: 2 Type: Results: Drug Test: 2 Type: Results:			
First Harmful Event: 11 Most Harmful Event: 11 Operator/Ped Cond: 1				First Harmful Event: 11 Most Harmful Event: 11 Operator/Ped Cond: 1			
Operator Contributing Factors: 3				Operator Contributing Factors: 1			
Vehicle Contributing Factors: 1 Roadway Contributing Factors: 1				Vehicle Contributing Factors: 1 Roadway Contributing Factors: 1			
Direction of Travel: 4 Vehicle Maneuver: 5 Non-Motor Maneuver:				Direction of Travel: 4 Vehicle Maneuver: 5 Non-Motor Maneuver:			
Vehicle Class: 1 Vehicle Type: 8 Vision Obscured: 1				Vehicle Class: 1 Vehicle Type: 10 Vision Obscured: 1			
Number of Occupants: 1 Area of Initial Contact: 12 Damage to Veh: 2				Number of Occupants: 1 Area of Initial Contact: 6 Damage to Veh: 2			
Traffic-Way Flow: 3 Road Comp: 2 Road Character: 1				Traffic-Way Flow: 1 Road Comp: 2 Road Character: 1			
Number of Lanes: 6 Posted Speed: 70 Work Zone: 0				Number of Lanes: 2 Posted Speed: 70 Work Zone: 0			
Traffic Control: 7 Device Inoperative: Yes No				Traffic Control: 6 Device Inoperative: Yes No			
Citation Information: Citation # W97E42856 O.C.G.A. \$ Citation # O.C.G.A. \$ Citation # O.C.G.A. \$				Citation Information: Citation # O.C.G.A. \$ Citation # O.C.G.A. \$ Citation # O.C.G.A. \$			

  

<b>COMMERCIAL MOTOR VEHICLES ONLY</b>						<b>COMMERCIAL MOTOR VEHICLES ONLY</b>					
Carrier Name: PREMIER LLC						Carrier Name:					
Address 1871 BEXAR AVE E City HAMILTON State AL Zip 35570						Address City State Zip					
U.S. D.O.T. # 1993780 No. of Axles 1 G.V.W.R. 01						U.S. D.O.T. # No. of Axles G.V.W.R.					
Cargo Body Type Vehicle Config. Interstate Intrastate Fed. Reportable Yes No						Cargo Body Type Vehicle Config. Interstate Intrastate Fed. Reportable Yes No					
C.D.L.? Yes No C.D.L. Suspended? Yes No						C.D.L.? Yes No C.D.L. Suspended? Yes No					
Vehicle Placarded? Yes No Hazardous Materials? Yes No						Vehicle Placarded? Yes No Hazardous Materials? Yes No					
Haz Mat Released? Yes No						Haz Mat Released? Yes No					
If YES: Name or four Digit Number from Diamond or Box: One Digit Number from Bottom of Diamond:						If YES: Name or four Digit Number from Diamond or Box: One Digit Number from Bottom of Diamond:					
Ran Off Road Down Hill Runaway Cargo Loss or Shift Separation of Units						Ran Off Road Down Hill Runaway Cargo Loss or Shift Separation of Units					

## COLLISION FIELDS

Manner of Collision:	3	Location at Area of Impact:	1	Weather:	1	Surface Condition:	1	Light Condition:	1
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## NARRATIVE

Vehicle 2 was traveling West on Interstate 20 exiting onto State Route 6. Vehicle 1 was traveling West on Interstate 20 on the exit ramp, directly behind Vehicle 2. Vehicle 1 was following too closely to Vehicle 2 and struck the rear bumper of Vehicle 2 with the front bumper of Vehicle 1. Both vehicles came to final, controlled rests on the North shoulder of the exit ramp.

This investigation was digitally recorded GSP USB 2126, CAR 508.

## DIAGRAM

INDICATE  
NORTH



## PROPERTY DAMAGE INFORMATION

Damage Other Than Vehicle Owner

## WITNESS INFORMATION

Name (Last, First) Address City State Zip Code Telephone Number

## OCCUPANT INFORMATION

1	Name (Last, First): PARKER, ALVIN					Address: 1871 BEXAR AVE EAST ALPHARETTA, GA 30005				
	Age: 47	Sex: M	Unit # 1	Position: 1	Safety Eq: 3	Ejected: 1	Extricated: 2	Air Bag: 2	Injury: 0	Taken for Treatment: 2
	Injury Taken To:		By:		EMS Notified Time:		EMS Arrival Time:		Hospital Arrival Time:	
2	Name (Last, First): SMITH, JODY					Address: 3234 W ANDERSON DR LITHIA SPRINGS, GA 30122				
	Age: 44	Sex: M	Unit # 2	Position: 1	Safety Eq: 3	Ejected: 1	Extricated: 2	Air Bag: 2	Injury: 0	Taken for Treatment: 2
	Injury Taken To:		By:		EMS Notified Time:		EMS Arrival Time:		Hospital Arrival Time:	

## ADMINISTRATIVE

Photos Taken:	Yes	By:	Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404)635-2963.	
	<input checked="" type="checkbox"/> No			
Report By:	Agency:	Report Date:	Checked By:	Date Checked:
GRANT, ROBERT MICHAEL #0508	GSPD\POST 4	02/14/23	MOORE, MARSHALL L #0510	02/21/23

ADDITIONAL or FULL PAGE DIAGRAM

